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APPLICANTS

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** CONTINUING DATA ***** NO, DR

** FOREIGN APPLICATIONS ***** NO, DR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/23/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING 1	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>DR</i>				

ADDRESS

29683

HARRINGTON & SMITH, LLP

4 RESEARCH DRIVE

SHELTON, CT

06484-6212

TITLE

Repository for a mobile telephone

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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